SCANCELL

A NEW FRONTIER IN IMMUNO-ONCOLOGY

LSX Inv€$tival Showcase
London, 13th November 2018

LSE: SCLP.L

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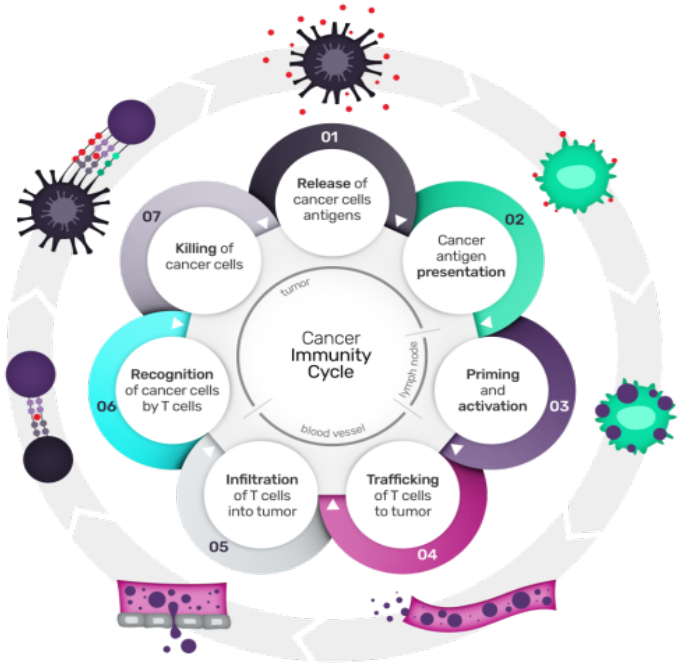
DIFFERENTIATED IMMUNO-ONCOLOGY CLINICAL STAGE OPPORTUNITY

COMPANY FOCUS	• Scancell is developing innovative immunotherapies for the treatment of cancer
MARKET OPPORTUNITY	• Immuno-oncology is one of the fastest growing sectors in the biopharmaceutical industry (est. CAGR ~20% over next 5 years)
PROPRIETARY TECHNOLOGY PLATFORMS	• Novel immunogenic antigens and modulation mechanisms that stimulate potent T-cell responses for the treatment or prevention of cancer • Unique mode of action of **IMMUNOBODY®** and **MODITOPE®** immunotherapies stimulate immune responses by presenting cancer antigens to trigger potent killer T-cell activation
CLINICAL STAGE ASSETS	• Four lead products in development • Phase II and Phase I/II studies in preparation targeting multiple cancer indications
COMPANY FACTS & FINANCIALS	• Scientific founder Professor Lindy Durrant • Corporate offices based in Oxford, UK • 23 employees (10 PhD's) • AIM listed (SCLP)

2 PLATFORMS, 4 LEAD PRODUCTS + MULTIPLE CANCER INDICATIONS

MEETING THE NEED FOR EFFECTIVE THERAPEUTIC CANCER VACCINES

- Key challenge is to stimulate an effective T cell response to reject or kill the growing tumour
- Most vaccine strategies only stimulate low frequency, low avidity T cell responses that fail to control tumour growth
- Scancell's novel therapies stimulate **high avidity** CD8 and/or CD4 T-cells that efficiently kill tumours



Ref: Chen and Mellman 2013

TWO DIFFERENTIATED PLATFORMS

IMMUNOBODY®

- DNA-based platform generates high avidity CD8 T-cells by presenting T-cell epitopes of known cancer antigens through a unique dual mode of action

MODITOPE®

- Modified peptides that generate potent killer CD4 T-cells to target antigens induced by stress-induced post-translational modifications (siPTM vaccines)

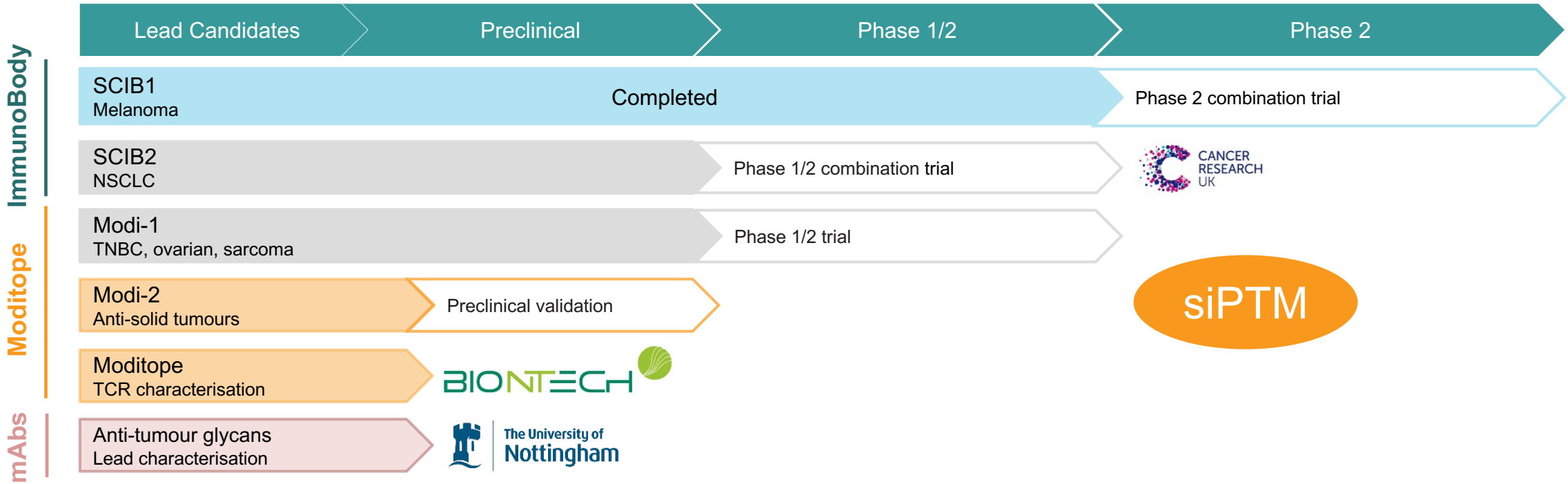
DEVELOPMENT PIPELINE

IMMUNOBODY®

- **SCIB1:** Targets malignant melanoma. Phase 1/2 study completed with strong survival data. Phase 2 combination trial with immune checkpoint inhibitor planned for 1H CY19
- **SCIB2:** Targets NSCLC. Phase 1/2 combination trial with immune checkpoint inhibitor to be funded and sponsored by Cancer Research UK (CRUK).

MODITOPE®

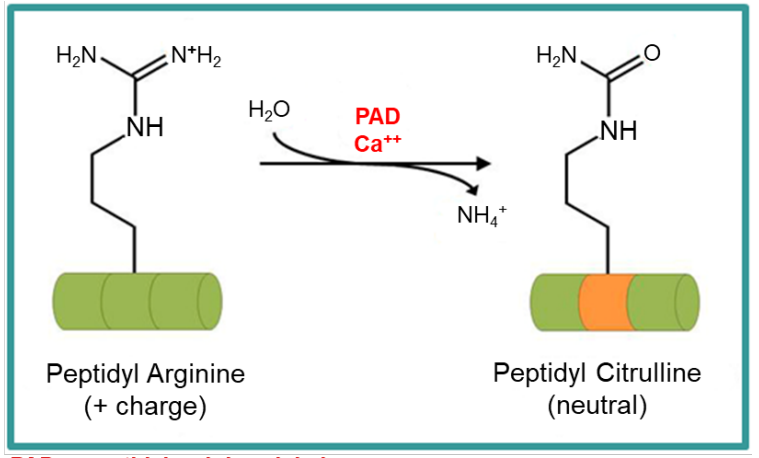
- **Modi-1:** Manufacturing process development initiated. Phase 1/2 trial in TNBC, ovarian and sarcoma planned for 2019.
- **Modi-2:** Targets multiple solid tumours. Preclinical development of selected epitopes.
- **TCR collaboration:** To clone and characterise T cell receptors against Modi-1 specific epitopes.



Stress-Induced Post-translational Modifications (siPTM)

- One such modification involves the process of **CITRULLINATION**
  - The alteration of proteins due to enzymatic conversion of arginine residues to citrulline
  - Citrullination occurs as a result of a degradation and 'recycling' process called **autophagy** that is induced in stressed cells, including cancer cells
  - Citrullinated epitopes presented on **MHC class II**
  - Patent awarded in Europe, Japan, China, Australia; still being pursued in US but attorney confident we will get broad claims

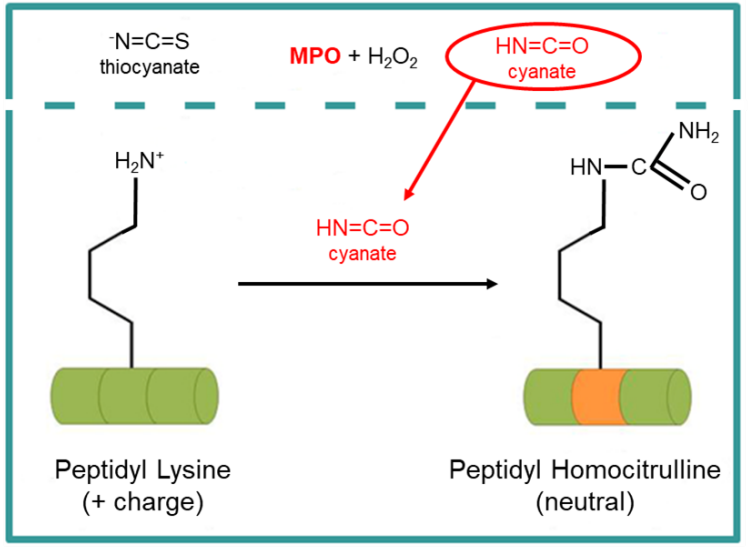
Modi-1



PAD = peptidylarginine deiminase

- Another modification involves the process of **HOMOCITRULLINATION**
  - The alteration of proteins due to conversion of lysine residues to homocitrulline
  - Homocitrullination occurs as a result of MPO released by myeloid-derived suppressor cells (MDSC) which converts thiocyanate to cyanate in the presence of H_2O_2
  - Cyanate diffuses into tumour cells and results in spontaneous homocitrullination of cytoplasmic proteins
  - These proteins are degraded during **autophagy** and homocitrullinated epitopes presented on **MHC class II**
  - Patent filed with broad claims in cancer and composition of matter for any use of homocitrullinated peptides

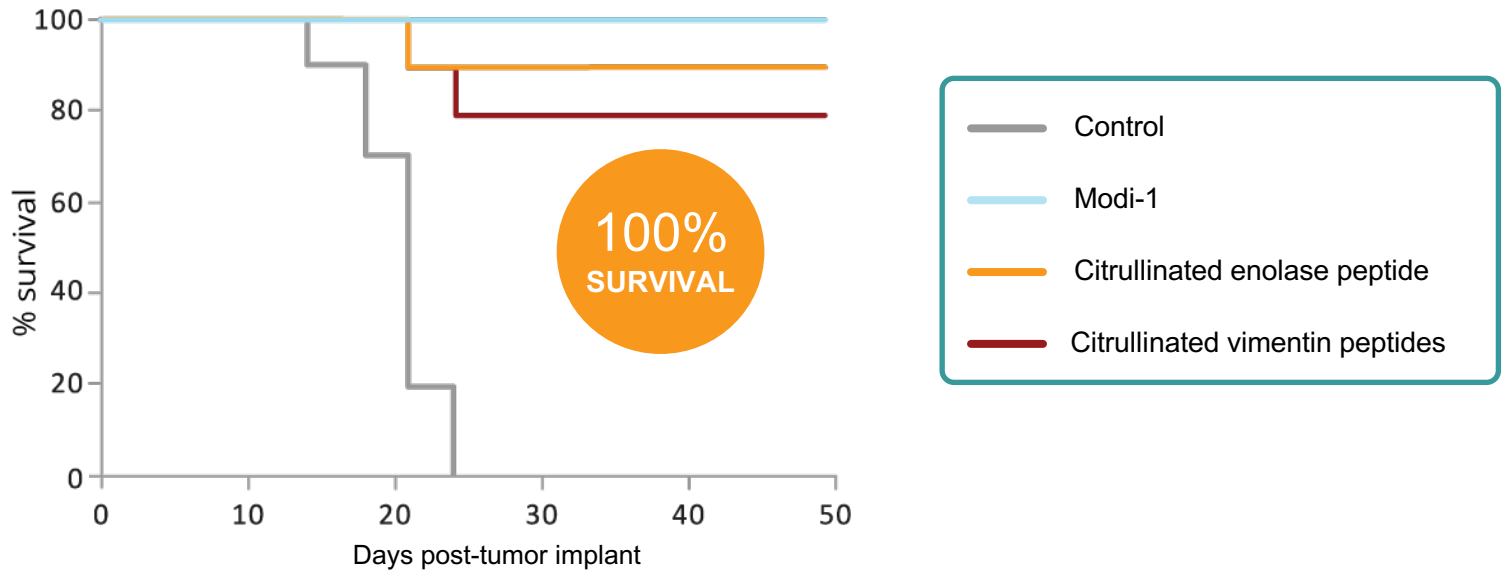
Modi-2



MPO = myeloperoxidase

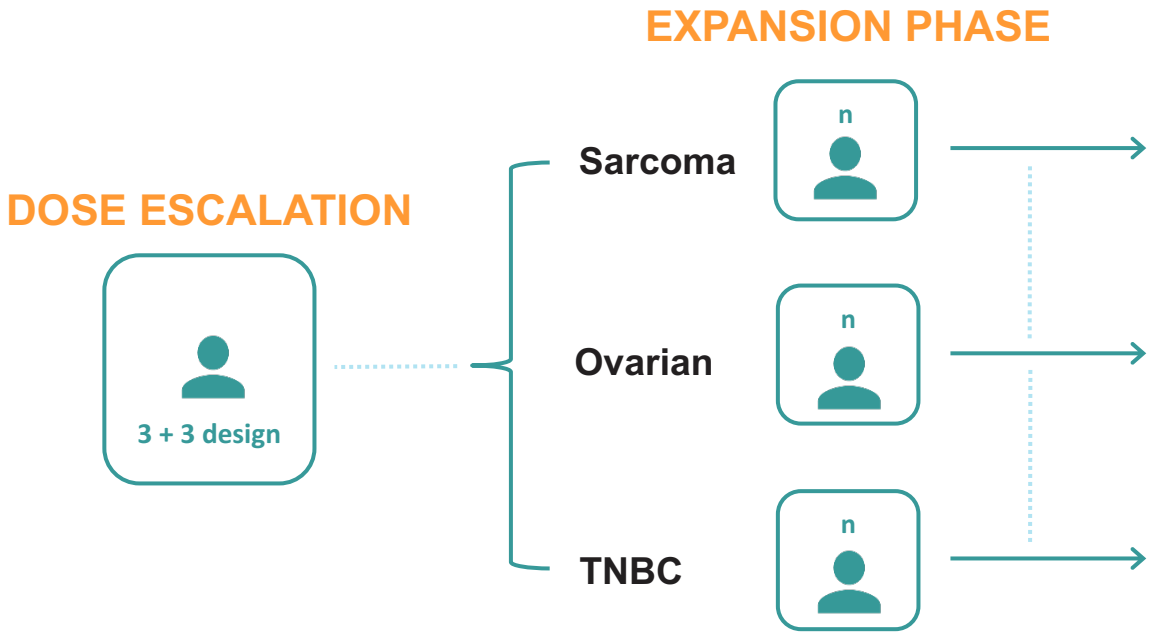
Modi-1

- Consists of:
  - Two citrullinated vimentin peptides (Vim-1 and Vim-2)
  - One citrullinated enolase peptide (Eno-1)
- Vimentin and enolase targets are highly expressed in triple negative breast cancer (TNBC) (90%), ovarian cancer (95%), and sarcoma (100%) - all with high unmet medical need
- Modi-1 induced potent anti-tumour responses in mice with established melanoma (B16)
- **A single immunization of Modi-1 resulted in a 100% survival rate in animal models**



PATIENT POPULATION

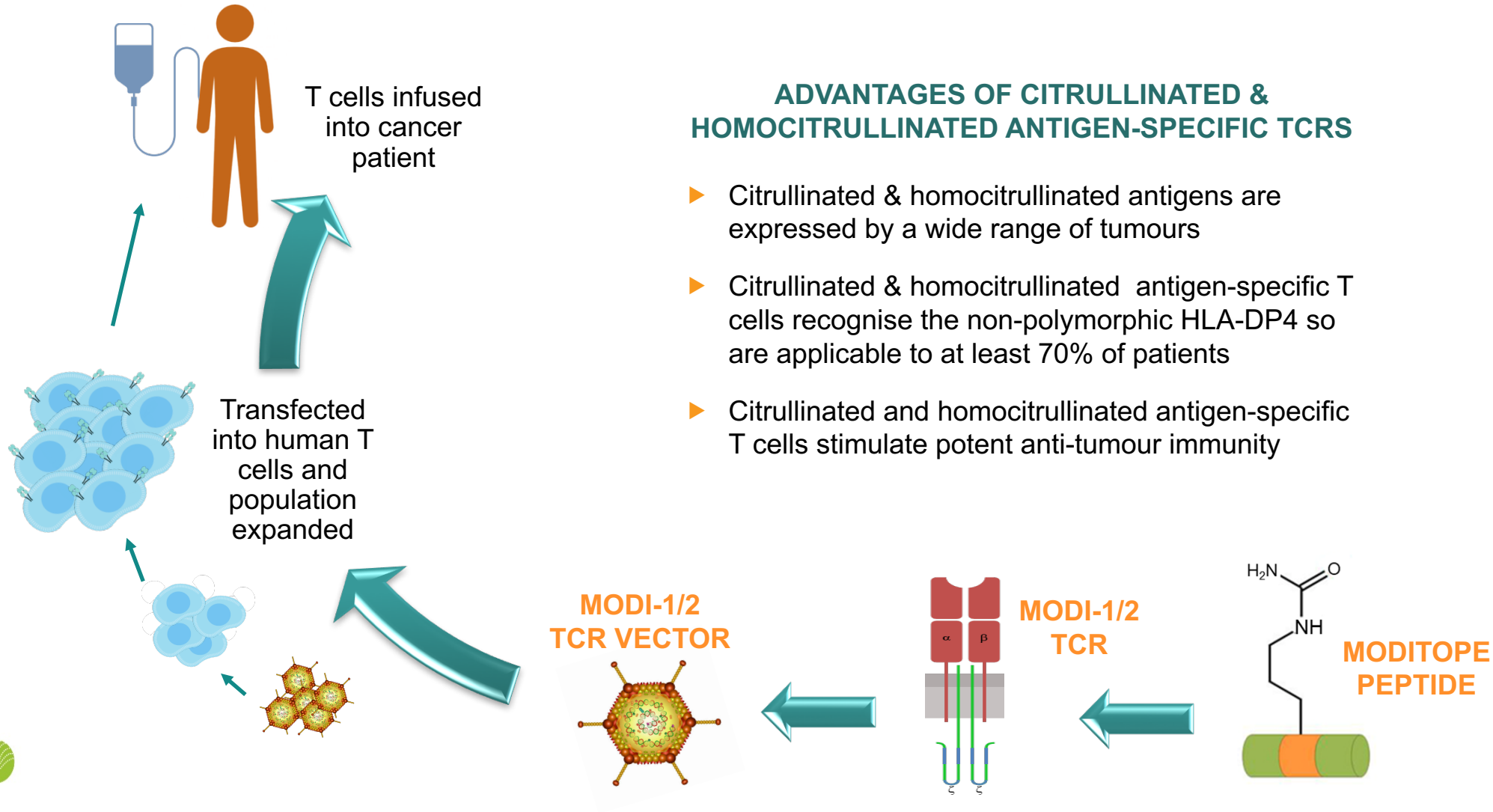
- Patients with tumours with high vimentin or enolase expression (e.g., sarcoma, triple negative breast cancer, ovarian)
- Failed or intolerant to standard of care therapies



Dosing regime

Dose escalation: 10, 50, 250 µg
Weeks 1, 3, 6, 12 and 24
Patients may continue to receive Modi-1 at 12-week intervals up to 2 years

MODITOPE® TCR RESEARCH COLLABORATION



ADVANTAGES OF CITRULLINATED & HOMOCITRULLINATED ANTIGEN-SPECIFIC TCRS

- Citrullinated & homocitrullinated antigens are expressed by a wide range of tumours
- Citrullinated & homocitrullinated antigen-specific T cells recognise the non-polymorphic HLA-DP4 so are applicable to at least 70% of patients
- Citrullinated and homocitrullinated antigen-specific T cells stimulate potent anti-tumour immunity

BIONTECH

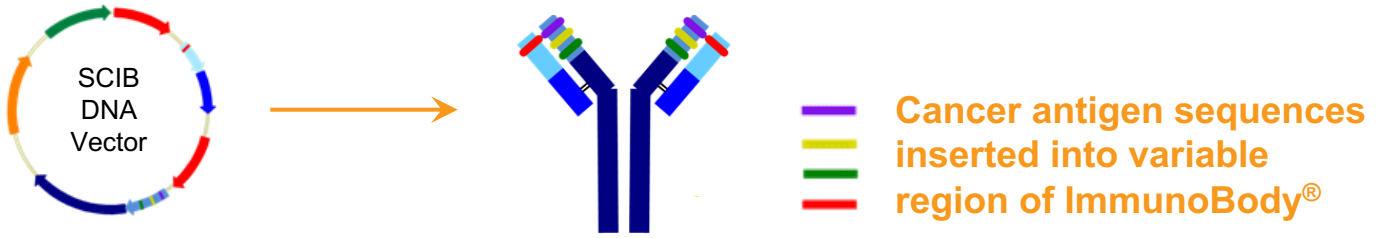
EXTERNAL VALIDATION OF MODITOPE® PLATFORM
INTERNAL PROJECTS ADVANCED AND EXPANDED

MODITOPE®

- Research collaboration to develop T-cell based therapies established with BioNTech
- License agreed with ISA Pharmaceuticals for development of Amplivant® Modi-1 conjugate therapy
- GMP manufacturer contracted for production of Modi-1/Amplivant® conjugate
- Modi-1 clinical study expected to start in CY19
- Homocitrullinated peptides under evaluation for inclusion in new Modi-2 vaccine targeting multiple solid tumours
- Strong Patent protection
- Shortlisted for CRUK Grand Challenge award; Project Blueprint

THE IMMUNOBODY® PLATFORM

- Proprietary patent protected platform
- Several cancer associated T cell epitopes are engineered into a human antibody framework to make a genetic antigen/antibody complex
- Delivered as a DNA plasmid using electroporation



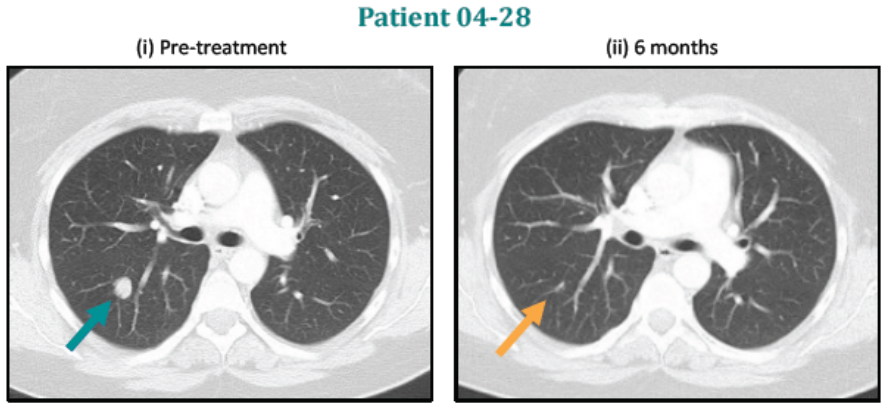
- Nano-vesicle delivery under evaluation
- Novel dual mechanism of action based on **direct** and **cross-presentation**
- SCIB1 for melanoma (**TRP-2/gp100 melanoma associated antigens**): Phase 1/2 clinical trial complete, Phase 2 planned
- SCIB2 for lung cancer (**NY-ESO-1**): Clinical development partnership with CRUK

SCIB1 IN PATIENTS WITH MELANOMA

SCIB1 has an excellent safety profile with no dose-limiting toxicities and no serious adverse events related to study drug or delivery device

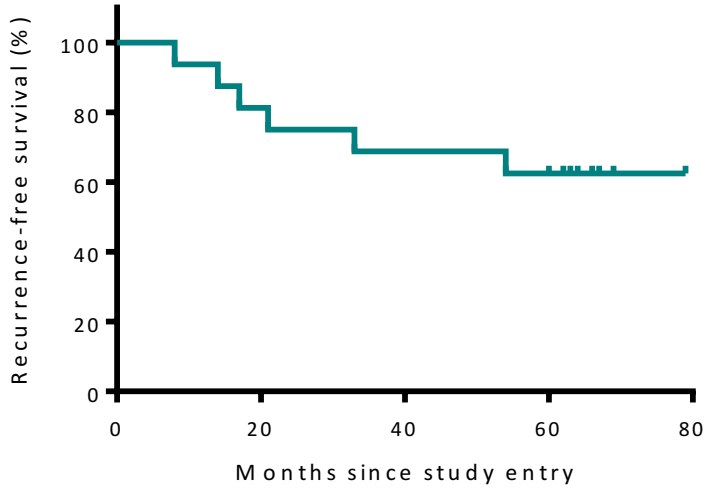
TUMOUR RESPONSE

Patient with tumour received 8 mg SCIB1 and showed a marked reduction in size of detectable lung lesions

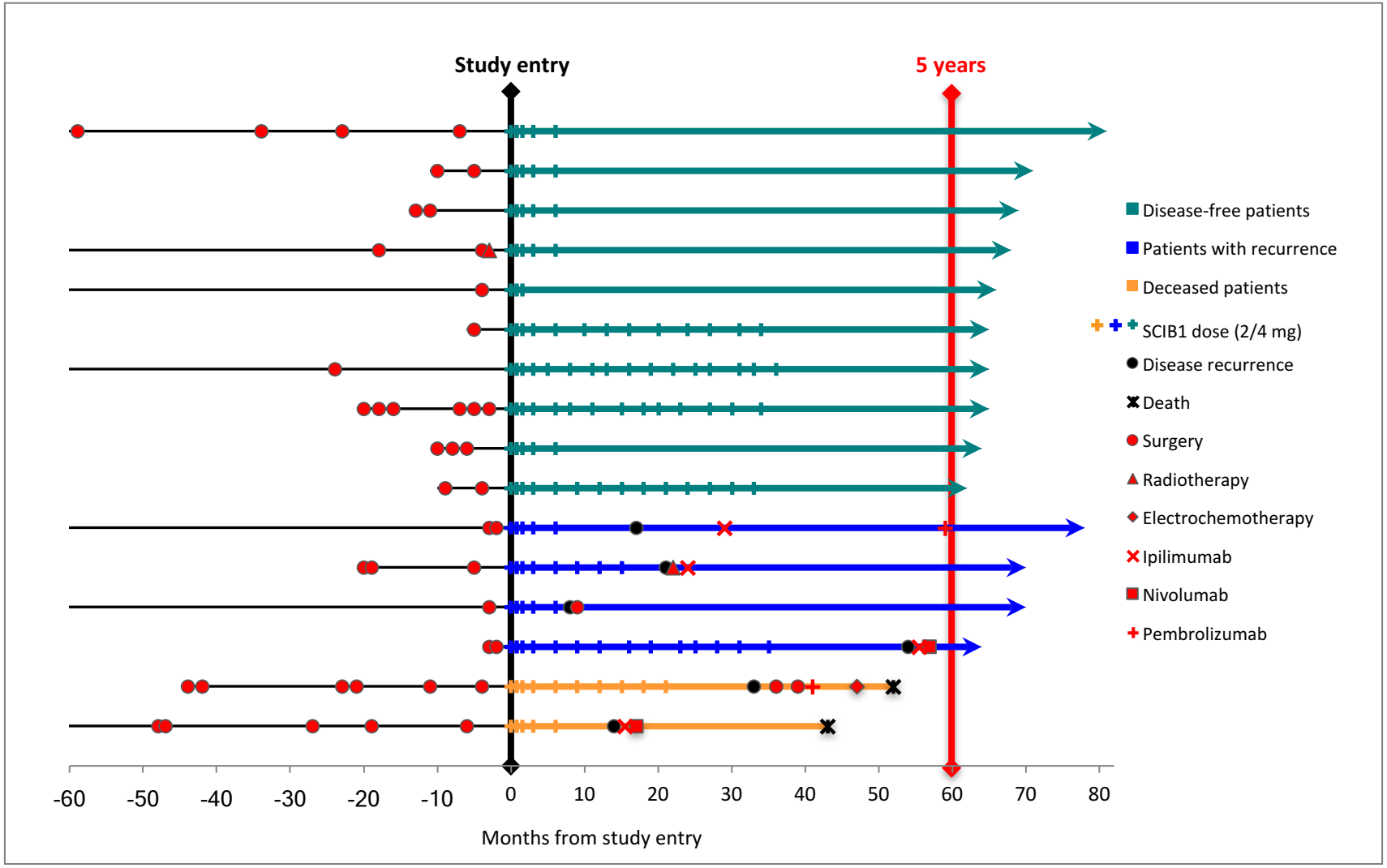


SURVIVAL IN RESECTED PATIENTS

- Overall survival with SCIB1 treatment superior to historical survival rates
- 14 of 16 resected patients receiving 2-4 mg doses have survived for more than 5 years (February 2018)
- Melanoma recurrence rates are lower in SCIB1-treated patients than historical controls



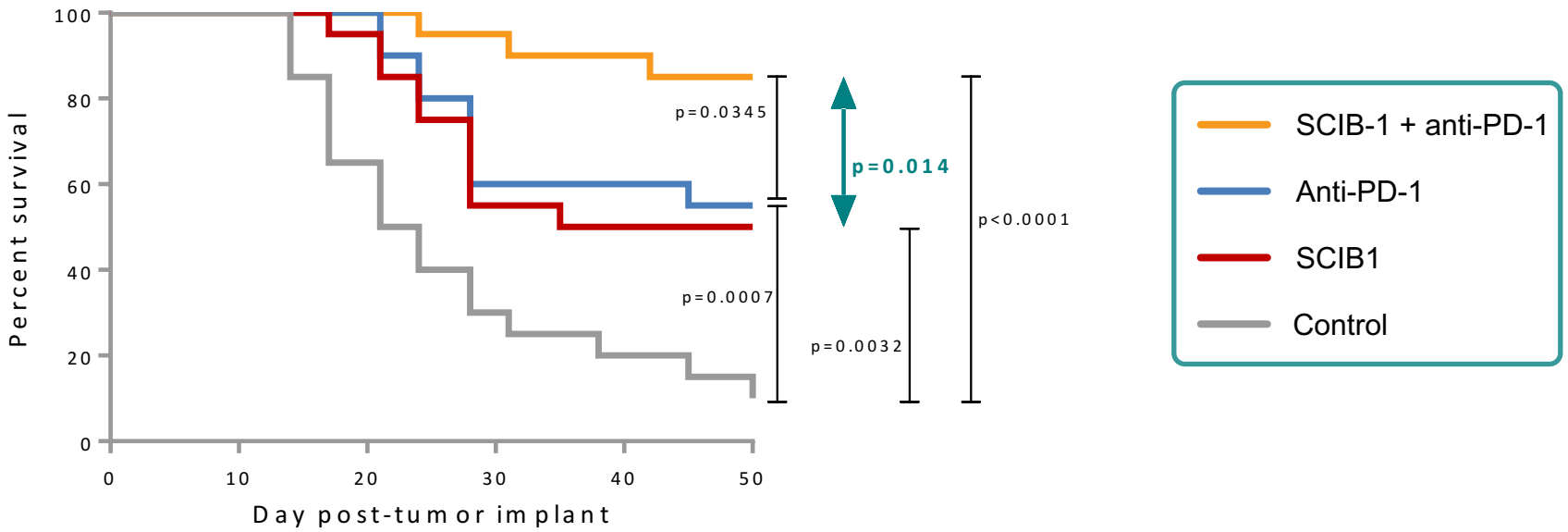
PATIENTS WITHOUT TUMOUR PRESENT AT STUDY ENTRY



SCIB1 BOOSTS IMMUNE CHECKPOINT THERAPY

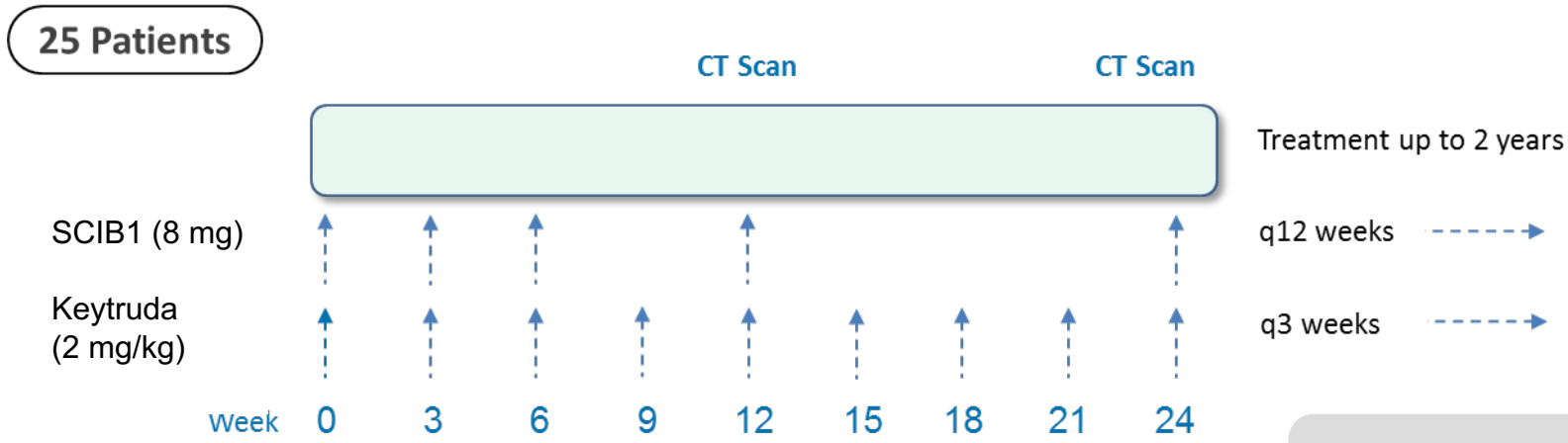
IN A MOUSE MELANOMA MODEL, SURVIVAL RATES WERE SIGNIFICANTLY BOOSTED WHEN ANTI-PD-1 THERAPY WAS COMBINED WITH SCIB1 TREATMENT

- Survival rates for SCIB1 ImmunoBody® monotherapy ≈ anti-PD-1
- Monotherapy viable option for resected melanoma patients
- Combination therapy resulted in an 85% survival rate
- SCIB1 also upregulates PD-L1 expression and memory response



PATIENT POPULATION

- Histologically confirmed, unresectable AJCC stage III or stage IV melanoma
- No prior systemic treatment for advanced disease
- Suitable for treatment with Keytruda (pembrolizumab), with measurable disease
- Part 1 safety run-in (n=6); Part 2 additional 19 patients; total = 25 patients



Trigger to advance development ≥ 12 RECIST responses in 25 patients

Assumptions

- Response rate to Keytruda = 30%
- Response rate of interest for combination = 55%

IDENTIFIED OPPORTUNITIES IN A RANGE OF TREATMENT SETTINGS

IMMUNOBODY®

SCIB1

- In combination with checkpoint inhibitors in patients with late stage disease to increase efficacy without compromising safety
- As monotherapy in patients with resected disease (adjuvant setting) to delay or prevent recurrence

SCIB2

- Lung cancer huge unmet medical need; deaths per year greater than melanoma, colon, breast and prostate cancers combined
- Checkpoint inhibitors less effective in lung cancer, with 80% of patients requiring a better SOC

MODITOPE®

Modi-1 & Modi-2

- siPTM vaccine class
- Innovative mechanism of action potentially targets all solid tumours
- Modi-1 and Modi-2 will target tumours that are unresponsive to existing immunotherapy (turning “cold” tumours to “hot”)
- Identification of Modi-specific TCRs provides a novel pathway for CD4-based TCR therapy

HIGHLIGHTS FOR FY17/18

Operational

- SCIB2 clinical development partnership with Cancer Research UK (CRUK)-*December 2017*
- Moditope research Collaboration with BioNTech to develop T-cell receptor therapies- *January 2018*
- Licensing of ISA Pharmaceuticals Amplivant adjuvant technology for Modi-1- *February 2018*
- Contracting PolyPeptide Group for good manufacturing practice (GMP) manufacture of Modi-1- *March 2018*
- In-licensing of novel monoclonal antibodies against tumour associated glycans and antibody engineering technology- *April 2018*
- *Exercise of commercial option to Ichor TriGrid 2.0 electroporation delivery device for SCIB1*

Financial

- Cash at bank on 30th April 2018 was £10,303,168 (2017: £2,672.335)
- Overall loss for the year £4,194,509 (2017: £3,544,979)
- Share capital placing:
  - Placement £4.7m net of costs-May 2017
  - Placement £6.9m net of costs-April 2018
  - *Open Offer £1.1m net of costs-May 2018*
- *Exercise of share options by Ichor £143,307- July 2018*

ANTICIPATED NEWSFLOW + MILESTONES CY19

IMMUNOBODY®

SCIB1

- SCIB1/checkpoint inhibitor Phase 2 US/UK combination study in late stage melanoma, planned to start 1H19, subject to regulatory submissions
  - Opening of IND
  - Commencement of the Phase 2 combination trial utilising Ichor TriGrid v2.0 electroporation device

SCIB2

- CRUK development activities for initiation of SCIB2 Phase 1/2 study for NSCLC

MODITOPE®

Modi-1

- Preparation for the First-In-Human study with Modi-1 in patients with TNBC, ovarian cancer and sarcoma planned to start CY19
- Identification of Modi-specific TCRs in collaboration with BioNTech

Modi-2

- Pre-clinical development for multiple solid tumour indications
- Extension of patent portfolio

FUTURE VALUE DRIVERS

2 PLATFORMS, 4 LEAD PRODUCTS + 5 CORE ACTIVITIES

CLINICAL DATA	• Generate meaningful clinical data to address unmet needs: clinical read-outs (SCIB1 Phase 2 & Modi-1 Phase1/2 pt 1) anticipated in next 2 years
PIPELINE EXPANSION	• Extend utility of Moditope platform beyond Modi-1 and Modi-2 in association with key industry players e.g., TCRs • Lead generation and optimisation of anti-glycan mAbs
TECHNOLOGY PARTNERSHIPS	• Evaluate and implement enabling technologies e.g., nano-vesicle delivery (Immunobody), and adjuvant (Moditope), to aid and de-risk development
CLINICAL PARTNERSHIPS	• Establish relationships with key opinion leaders and clinical networks to ensure utility in clinical practice e.g., CRUK and patient advocacy groups (Addario)
INDUSTRY PARTNERSHIPS	• Explore synergies with large Pharma/Biotech companies in identifying combination therapies for optimal outcomes e.g., checkpoint inhibitors

BIONTECH

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ichor medical systems

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